

MULTIMEDIA



UNIVERSITY

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MULTIMEDIA UNIVERSITY

FINAL EXAMINATION

TRIMESTER 2, 2016/2017

LEA 1027 – ENGLISH FOR ACADEMIC PURPOSES
(All Sections)

24 FEBRUARY 2017
3.p.m. – 5.00 p.m.
(2 Hours)

INSTRUCTIONS TO STUDENT

1. This question paper consists of **SEVEN** printed pages with **2** sections.
2. Answer **ALL** questions.
3. Write **ALL** your answers in the Answer Booklet.

SECTION A: READING COMPREHENSION [30 MARKS]

Instructions: Read the following passage and answer the following questions.

- 1 Humans inherited a propensity for violence from our primate ancestors, a new study says, making it easy for us to think, “Ah, see—we really are just animals.” Yet, that does not give animals enough credit. 1
- 2 The first humans were about as violent as could be expected based on their family tree, researchers reported on September 28 in the journal *Nature*. The scientists **pored** through examples of lethal violence—not animals killing other species, such as predators and prey, but killings within a species, whether by cannibalism, infanticide, or aggression. 5
- 3 They looked for evidence of this **ghastly** activity among four million recorded deaths in more than a thousand different mammals, from shrews to primates. On top of that, they compiled a history of human slayings. 10
- 4 One pattern stood out pretty clearly: lethal violence increased over the course of mammal **evolution**. While only about 0.3 percent of all mammals die in conflict with members of their own species, that rate is six fold higher, or about 2 percent, for primates. Early humans likewise should have about a 2 percent rate—and that lines up with evidence of violence in Paleolithic human remains. 15
- 5 The medieval period was a particular killer, with human-on-human violence responsible for 12 percent of recorded deaths. However, for the last century, we have been relatively peaceable, killing one another off at a rate of just 1.33 percent worldwide. Furthermore, in the least violent parts of the world today, we enjoy homicide rates as low as 0.01 percent. 20
- 6 “Evolutionary history is not a total straitjacket on the human condition; humans have changed and will continue to change in surprising ways,” says study author José María Gómez of Spain’s Arid Zones Experimental Station. “No matter how violent or pacific we were in the origin, we can **modulate** the level of interpersonal violence by changing our social environment. We can build a more pacific society if we wish.” 25
- 7 What may be most surprising to some of us, though, is not how violent we are, but rather how we compare to our mammalian cousins. It is not easy to estimate how often animals kill each other in the wild, but Gómez and his team got a good overview of the species most and least likely to kill their own kind. The number of hyenas killed by other hyenas is around 8 percent. The yellow mongoose? Ten percent. And lemurs—cute, bug-eyed lemurs? As many as 17 percent of deaths in some lemur species result from lethal violence. 30
- 8 Yet consider this: The study shows that 60 percent of mammal species are not known to kill one another at all, as far as anyone has seen. Very few bats (of more than 1,200 species) kill each other. Apparently, pangolins and porcupines get along fine without **offing** members of their own species. 35
- 9 Dolphins, long thought to be relatively peaceful marine mammals, have been documented trying to kill their own young. Whales are also generally thought not to kill their own kind. However, dolphin biologist Richard Connor of the University of Massachusetts Dartmouth notes that a dolphin **infanticide** attempt was documented recently, and he cautions that whales, as their close relations, might also be more violent than we have thought. 40
- 10 “We could witness a lethal fight in dolphins but not know it, because the victim 45

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swims away apparently **unimpaired**, but is bleeding to death internally,” he says. More often, though, people think animals are more violent than they really are, says animal behavior expert Marc Bekoff, an emeritus professor at the University of Colorado Boulder.

- 11 “Violence might be deep in the human **lineage**, but I think people should be 50
very cautious in saying that when humans are violent, they are behaving like
nonhuman animals,” Bekoff says.
- 12 Bekoff has long **contended** that nonhumans are predominantly peaceful, and he
points out that just as some roots of violence can be found in our animal past, so
can roots of altruism and cooperation. He cites the work of the late anthropologist 55
Robert Sussman, who found that even primates, some of the most aggressive
mammals, spend less than one percent of their day fighting or otherwise
competing.
- 13 After all, challenging another animal to a duel is risky, and for many animals
the benefits do not **outweigh** the risk of death. Highly social and territorial animals 60
are the most likely to kill one another, the new study found. Many primates fit that
killer profile, though as experts point out, not all of them. Bonobos have mostly
peaceable, female-dominated social structures, while chimps are much more
violent.
- 14 These differences among primates matter, says Richard Wrangham, a biological 65
anthropologist at Harvard known for his study of the evolution of human warfare.
In chimpanzees and other primates that kill each other, infanticide is the most
common form of killing. However, humans are different—they frequently kill each
other as adults.
- 15 “That ‘adult-killing club’ is very small,” he says. “It includes a few social and 70
territorial carnivores such as wolves, lions, and spotted hyenas.” While humans
may be expected to have some level of lethal violence based on their family tree, it
would be wrong to conclude that there is nothing surprising about human violence,
Wrangham says.
- 16 When it comes to murderous tendencies, he says, “humans really are 75
exceptional.”

Adapted from Engelhaupt, E. (2016, September 28).
How Human Violence Stacks Up Against Other Killer Animals. Retrieved from
<http://news.nationalgeographic.com/2016/09/human-violence-evolution-animals-nature-science/>

Question I (10 marks)

Instructions: Explain the meaning of each of the following words taken from the passage.
Provide a word or a phrase that best explains its meaning within the context of the passage.

1. pored (line 6)
2. ghastly (line 9)
3. evolution (line 13)
4. modulate (line 25)
5. offing (line 38)
6. infanticide (line 42)
7. unimpaired (line 46)

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- 8. lineage (line 50)
- 9. contended (line 53)
- 10. outweigh (line 60)

Question II (20 marks)

Instructions: Answer the following questions in complete sentences.

- 1. In your own words, briefly explain the author's thesis statement. (2 marks)
- 2. Name **two (2)** ways of killing within a species. (1 mark)
- 3. What is the evidence that humans are considered relatively peaceful in the last century? (2 marks)
- 4. State Jose Maria Gomez's main idea in paragraph 6. (3 marks)
- 5. Name **four (4)** animals that kill their own kind. (2 marks)
- 6. Why are whales considered to be more violent than we have thought? (2 marks)
- 7. Why does Marc Bekoff say that animals may be predominantly peaceful? (2 marks)
- 8. How are Bonobos and chimps different? (2 marks)
- 9. According to Richard Wrangham, why is it wrong to conclude that there is nothing surprising about human violence? (2 marks)
- 10. Identify a tone used by the author and provide an example. (2 marks)

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SECTION B: SYNTHESIZING INFORMATION [20 MARKS]

Instructions: Read the following articles carefully. Write a **synthesis essay** in about **350 words**. Use the 3 articles provided to support your argument. Please cite the articles.

Article 1: The Effects of Depression on the Body

Ann Pietrangelo

We all feel sad or anxious at times. It is a normal part of life. However, clinical depression does interfere with your ability to function. Depression affects how you feel and can also cause changes throughout your body. Major depression is a serious medical condition that has a dramatic effect on your quality of life.

According to the National Institute of Mental Health, about 6.7 percent of adults in the United States have depression. People with depression often develop other health issues as well. Major depression is also called major depressive illness or clinical depression.

Depression can cause a lot of symptoms, many of which are easy to dismiss or ignore. It may be especially difficult to detect in children, who cannot articulate their symptoms, or in older adults, who may blame their symptoms on aging.

Symptoms of depression include overwhelming sadness, grief, and a sense of guilt. People with depression often complain about feeling tired all the time. They also tend to have trouble sleeping. Other symptoms include irritability, anger, and loss of interest in things that used to bring pleasure, including sex. It may be described as a feeling of emptiness or hopelessness. Some people may find it difficult to put these feelings into words. Frequent episodes of crying may be a sign of depression, but not everyone who is depressed cries.

Other symptoms include inability to concentrate, memory problems, and difficulty making decisions. People with depression may have trouble maintaining a normal work schedule or fulfil social obligations.

Some people who are depressed may use alcohol or drugs. They may become reckless or abusive. A depressed person may consciously avoid talking about it or try to mask the problem. People suffering from depression may be preoccupied with thoughts of death or hurting themselves. There is an increased risk of suicide.

Depression can cause headaches, chronic body aches, and pain that may not respond to medication. Depression can affect the appetite. Some people cope by overeating or bingeing. This can lead to weight and obesity-related illnesses like type 2 diabetes. Others lose their appetite or fail to eat nutritious food. Eating problems can lead to stomach aches, cramps, constipation, or malnutrition. Symptoms may not improve with medication.

Depression and stress are closely related. Stress hormones speed heart rate and make blood vessels tighten, putting your body in a prolonged state of emergency. Over time, this can lead to heart disease.

According to Harvard Medical School, patients who are depressed when hospitalized for a heart condition are two to five times likelier to have severe chest pain, heart attack, or stroke,

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in the next year. Recurrence of cardiovascular problems is linked more closely to depression than to smoking, diabetes, high blood pressure, or high cholesterol. Untreated, depression raises the risk of dying after a heart attack. Heart disease is also a trigger for depression.

Depression and stress may have a negative impact on the immune system, making you more vulnerable to infections and diseases.

Adapted from Pietrangelo, A. (2014, September 30). *The Effects of Depression on the Body*. Retrieved from <http://www.healthline.com/health/depression/effects-on-body>

Article 2: What Causes Depression?

Michael Yapko

What causes depression? The best answer is many things. The contributing factors vary substantially from one person to the next.

Biology may matter - there can be genetic and neurochemical factors that play a role in the onset and course of depression. The misconception many people have, though, is that you have a neurochemical anomaly and then depression results.

In fact, it is a two-way street: your experience influences your neurochemistry at least as much as your neurochemistry affects your experience. These include your problem-solving capabilities, your coping style (whether you deal with problems directly and proactively or either ruminate or go into avoidance), your decision-making style (many people who are either depressed or are prone to depression make bad decisions that lead to depression and even make their depression worse), your perceptions of control (whether you see yourself as a victim of life experience or as having the power to take charge of your life), the quality of your relationships and relationship skills, and many other such personal factors.

Feeling hopeless and helpless are part of the disorder, and so depressed people are prone to believe there is nothing they can do to help themselves. That is flatly untrue. When people educate themselves and take proactive and deliberate steps to get help, including self-help, the probability of overcoming depression is high.

I would suggest that you completely ignore the disempowering interpretations people give you about the meaning of your depression. Instead focus on learning what your particular risk factors and vulnerabilities are and then learning the strategies you will need for skilfully managing your mood.

Even when depression eventually lifts, you will need to manage your mood with self-awareness and skill. It is a life skill everyone needs, not just those prone to depression.

Therapy can be of great help and should feature somewhere in your plans to overcome your depression. You can't effectively treat yourself when you don't know much about what you're up against.

Genetics play a mild role in major depression. Genetics may serve as a predisposing factor to depression, but the evidence is growing that depression has a great deal to do with the ongoing and repetitive interactions within the family.

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Just as an individual has a mood, so does a family. Is the family atmosphere a serious or playful one? Emotionally close or emotionally unexpressive? Supportive or competitive? Tolerant of individual differences or rejecting of them? Problem-solving oriented or avoidant of problems?

Growing up, you have countless interactions with parents and significant others, each of which holds the potential to teach you specific skills or perspectives. If you live with perfectionistic parents, for example, you may grow up with the idea that nothing you do is right or good enough, a belief damaging to all you may attempt to do, whether in school, the job market, or relationships. It can lead to and/or maintain depression.

Interactions within the family shape your view of yourself and the world. The feedback you get in the form of peoples' reactions lets you know what's expected of you, how others see you, what you can express, even how you should manage your own body. Your self-image is largely a product of others' feedback.

Families increase or decrease vulnerability to depression in other ways, too. For example, if parents are not good problem solvers and do not actively teach skills for managing the problems of life, you cannot learn effective strategies for living. Much depression today arises when people get overwhelmed by problems they just do not know how to manage.

The values parents teach, whether through word or deed, provide either a solid or shaky foundation for making decisions in life. If you learn to value money over service to others, or competition over cooperation, many choices in your life will be affected, although not all of them for the better.

The bottom line is this: Your family plays a big role in your life experience, and family members cannot teach you what they don't know. Instead of either passively blaming them or suffering needlessly, you must be proactive in learning your own vulnerabilities and how to manage them skillfully.

Adapted from Yapko, M. (2016, June 9). *What Causes Depression?*
Retrieved from <https://www.psychologytoday.com/articles/200307/what-causes-depression>

Article 3: Common Treatments for depression

Psychotherapy and antidepressant medications are the most commonly used treatments for managing depression. Many people use a combination of the two, while trying to integrate holistic techniques such as meditation and mindfulness, regular exercise, sleep-regulation, and proper nutrition. It is also recommended that the sufferer have a complete physical examination to rule out anything, like a thyroid condition, that can mimic depression. Treatment outcomes will vary, of course, but these approaches yield positive outcomes for providing relief.

Medication is often used to help reduce acute symptoms of depression. Marriage and family therapists can provide referrals to a psychiatrist for a medication evaluation. Many people resist medication because of the stigma that exists with depression. In cases of severe depression, medication is often necessary to help neurotransmitters in the brain connect in

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ways that restore a sense of balance to the sufferer. For some, medication is a life-long part of treating depression while others may only need medication for a period of time. Either way, it is important to remember that depression is something that happens to the sufferer not a choice he or she is making. Being supportive and non-judgmental, while also encouraging the person to engage in his or her competencies are ways of offering support to the entire family system.

Psychotherapy with a marriage and family therapist is as effective as medication, and in many ways better than medication alone. While it may take longer to see results than it does with medication, people who receive therapy tend to have a lower relapse rate, and tend to feel better as an active participant in the recovery process.

Because depression affects the entire family, marriage and family therapists can help individuals and families by empowering them as a unit. By educating families, stigma is reduced and families can focus on developing skills to manage their difficulties during times of depression in the family. One of the most effective treatment models for depression is cognitive behavioral therapy (CBT), which teaches clients and their family members how to identify and correct distorted thinking and how to behave more effectively.

In recent years, clinicians like marriage and family therapists have been using mindfulness in conjunction with CBT to help those suffering from depression. Mindfulness aims at being in the present moment while focusing on reframing one's relationship with depression. The sufferer, for example, can benefit from a better understanding of depression--one that does not label or define the person as depression.

The fact that long-term research shows the effectiveness of medication and psychotherapy for treating depression can be wonderfully reassuring for depression sufferers and their families. Depression is highly responsive to integrative treatments that may include medication, psychotherapy, and psycho-education. Marriage and family therapists are trained to work relationally, which is most helpful when working with depression.

Adapted from *Depression*. (2016, July). Retrieved from http://www.aamft.org/iMIS15/AAMFT/Content/consumer_updates/depression.aspx

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